

Application or Docket Number

Application or Docket Number  
09/592775

Substitute for Form PTO-875

(Column 1)

(Column 2)

**MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160))**

• If the difference in column 1 is less than zero, enter "0" in column 2.

(Column 1)

(Column 2)

(Column 9)

AMENDMENT A	(Column 1)	(Column 2)	(Column 3)	(Column 4)	(Column 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
ACE					
Total (37 CFR 1.16(d))	29	Minus	29		
Independent (37 CFR 1.16(e))	3	Minus	3		
Application Size Fee (37 CFR 1.16(e))					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

## AMENDMENT B

(Column 1)

(Column 2)

(Column 3)

AMENDMENT #	(Column 1)		(Column 2)		PRESENT EXTRA
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		
Total (37 CFR 1.16(d))	39	Minus	29	= 10	
Independent (37 CFR 1.16(d))	4	Minus	3	= 1	

Application Size Fee (37 CFR 1.16(f))

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(f))

OR

OTHER THAN  
SMALL ENTITY

RATE (\$)	FEE (\$)
X =	
X =	
TOTAL	

TOTAL

RATE (\$)		FEE (\$)
X	=	
X	=	
TOTAL		

TOTAL

## OR

OTHER THAN  
SMALL ENTITY

RATE (%)	ADDITIONAL FEE (%)
x 25 %	
x 100 %	
TOTAL ADDITIONAL FEE	

TOTAL  
ADD'L FEE

	RATE (\$)	ADDITIONAL FEE (\$)
OR	x 50 =	
OR	x 200 =	
OR		
OR		
OR	TOTAL ADD'L FEE	

OR

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

TOTAL  
ADD'L FEE

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	500.00
OR	X	200.00
OR		
OR	TOTAL	
OR	ADD'L FEE	

7.

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independently) Is the highest number found in the appropriate box in column 1.

The information required to obtain or retain a benefit by the public which is estimated to take 1 year to complete is estimated to take 1 year to complete.

\* If the "Highest Number Previously Paid For" is less than 3, enter "3".  
 \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 \* If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  
 The "Highest Number Previously Paid For" is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Call 1-800-BTO-9189 and select option 2

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1100, ... call 1-800-BTO-9189 and select option 2

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.